

City of San José  
Human Resources Department

## 2009 Health and In-Lieu Plan Semi-Monthly Rates

Effective from 1/1/2009 (PP 1) through 12/31/2009 (PP 27)

### OE3 and POA

(Health premiums are deducted the first 2 paydays of each month, and are pre-tax)

	Kaiser Single	Kaiser Family	Blue Shield HMO Single	Blue Shield HMO Family	Blue Shield POS/PPO Single	Blue Shield POS/PPO Family
<b>100% Benefits: Full-Time Employees Including RWW Employees who work 32 - 39 Hrs</b>						
Employee Contribution	23.39	58.25	38.10	114.51	124.64	337.15
City Contribution	211.27	526.07	211.32	526.22	211.57	526.88
Total	234.66	584.32	249.42	640.73	336.21	864.03
<b>75% Benefits: Part-Time Employees who work 30 - 39 Hrs &amp; RWW Employees who work 30 - 34 Hrs</b>						
Employee Contribution	76.20	189.76	90.93	246.06	177.53	468.87
City Contribution	158.46	394.56	158.49	394.67	158.68	395.16
Total	234.66	584.32	249.42	640.73	336.21	864.03
<b>62.5% Benefits: Part-Time &amp; RWW Employees who work 25 - 29 Hrs</b>						
Employee Contribution	102.61	255.52	117.34	311.84	203.97	534.73
City Contribution	132.05	328.80	132.08	328.89	132.24	329.30
Total	234.66	584.32	249.42	640.73	336.21	864.03
<b>50% Benefits: Part-Time &amp; RWW Employees who work 20 - 24 Hrs</b>						
Employee Contribution	129.02	321.28	143.76	377.62	230.42	600.59
City Contribution	105.64	263.04	105.66	263.11	105.79	263.44
Total	234.66	584.32	249.42	640.73	336.21	864.03

### ABMEI, AEA, AMSP, CAMP, CEO, IAFF, IBEW, MEF, Unit 99 and Unrepresented

(Health premiums are deducted the first 2 paydays of each month, and are pre-tax)

	Kaiser Single	Kaiser Family	Blue Shield HMO Single	Blue Shield HMO Family	Blue Shield POS/PPO Single	Blue Shield POS/PPO Family
<b>100% Benefits: Full-Time Employees Including RWW Employees who work 35 - 39 Hrs</b>						
Employee Contribution	22.19	55.27	45.91	133.72	135.42	363.99
City Contribution	200.46	499.13	200.52	499.35	200.79	500.04
Total	222.65	554.40	246.43	633.07	336.21	864.03
<b>75% Benefits: Part-Time Employees who work 30 - 39 Hrs &amp; RWW Employees who work 30 - 34 Hrs</b>						
Employee Contribution	72.30	180.05	96.04	258.55	185.61	489.00
City Contribution	150.35	374.35	150.39	374.52	150.60	375.03
Total	222.65	554.40	246.43	633.07	336.21	864.03
<b>62.5% Benefits: Part-Time &amp; RWW Employees who work 25 - 29 Hrs</b>						
Employee Contribution	97.36	242.44	121.10	320.97	210.71	551.50
City Contribution	125.29	311.96	125.33	312.10	125.50	312.53
Total	222.65	554.40	246.43	633.07	336.21	864.03
<b>50% Benefits: Part-Time &amp; RWW Employees who work 20 - 24 Hrs</b>						
Employee Contribution	122.42	304.83	146.17	383.39	235.81	614.01
City Contribution	100.23	249.57	100.26	249.68	100.40	250.02
Total	222.65	554.40	246.43	633.07	336.21	864.03

### Health In-Lieu Plan Payments

Payment in-lieu of coverage is available for qualified enrollees (full-time and RWW who work 32+ Hours)

Payments are made every payday, are taxable, and are subject to withholding

	OE3 & POA	ABMEI, AEA, AMSP, CAMP, CEO, IAFF, IBEW, MEF, Unit 99 & Unrepresented
If eligible for family coverage	233.81	221.84
If <u>not</u> eligible for family coverage	93.90	89.09